## Entry Blank—Please Type or Print

Outsite Case 3

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Ms./Artist  Mr./Artist	Maril'	yn Fari		(6)	•	
L IVIII. IVIII LISC _					(last nan	ne last)
Permanent Address	25861	Euclid	Chagr:	in P	arkv	vay
Address	Street		City			
Clevela	and, 4	4143 Daytir	me Tel. ( 216	6, 5	31-3	3471
Zip			area			
Temporary or Studio Address						
		Str	eet		City	
		Daytir	me Tel. (	)		
Zip			area			
If you do not p Reserve, in whi		n one of the cou e you born?	nties of the We	estern		
Collaborator (if	any)					
X Artist will p  ☐ Museum sh	ick up at Muse ould dispose o					
	Street					
City		State			Zip	
Special Ins	tructions					
Entry Blank mu	ust be complet	ted in full and sig	aned: forms red	eived ur	signed v	vill not

Entry Blank must be completed in full and signed; forms received unsigned will not be accepted.

When necessary, include instructions or a drawing for assembling and displaying an object.

Note carefully the dates for both delivery and return of objects. It is understood that the Museum shall dispose for its own account any objects not picked up by the dates given herein. It is also understood that accepted objects will remain on exhibition until September 5, 1993.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed herein.

Signature

I have received the upsold/unaccepted object(s) in good condition.

Signature Haufn Farmacol

## **Entry Blanks**

Specify category:

X Paintings

Materials used (media): acrylic Title Desecration Price or NFS Insurance Value Size if NFS Only 72" x 72" height x width x depth \$4000. GRAPHICS AND PHOTOGRAPHY ONLY Additional No. Total No. in Price of Print For Sale Edition Unframed **ACCEPTED** DO NOT WRITE IN THIS SECTION NOT ACCEPTED Specify category: ☐ Sculpture ☐ Crafts Paintings ☐ Graphics Photography Materials used (media): acrylic Title untitled Price or NFS Insurance Value 72" If NFS Only \$4000.00 GRAPHICS AND PHOTOGRAPHY ONLY Additional No. Total No. in Price of Print For Sale Edition Unframed DO NOT WRITE ACCEPTED

IN THIS SECTION

☐ Sculpture

☐ Graphics

☐ Crafts

Photography

Price of

Frame Only

**ACCEPTED** 

NOT ACCEPTED

Detach entire portion along dotted line and submit with slides, but retain tags

NOT ACCEPTED

72" X height x width x depth Price of Frame Only ACCEPTED REC'D NOT ACCEPTED DATE May

1993 MAY SHOW The Cleveland Museum of Art Cleveland, Ohio 44106

Marilyn Farinacci		
Name		
25861 Euclid Chagr:	in Parkway	
Address		
Cleveland, Ohio	44143	
City & State		Zip

## Notification #2

Do Not Detach

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X Paintings ☐ Sculpture ☐ Graphics ☐ Crafts

☐ Photography

Title

Desecration

DO NOT WRITE IN THIS S	ECTION AC	CEPTED	NOT ACCEPTED
49-(1)			X
Paintings  □ Sculpture	☐ Graphics ☐ Crafts	□ Pho	tography

Title

untitled

DO NOT WRITE IN THIS SECTION	ACCEPTED	NOT ACCEPTED
50(1)	*	

Return of Objects

Not Accepted: June 1–5 Accepted: September 14–18

It is understood that the Museum shall have the right to dispose for its own account any object not called for by the dates listed.

THIS IS YOUR ONLY RECEIPT TO CLAIM YOUR OBJECT